

N. M. OFFICIAL COMMISSION
P. O. BOX 1530
ROSWELL, NEW MEXICO 89240
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
El Paso Exploration Company
3. ADDRESS OF OPERATOR
1800 Wilco Bldg., Midland, TX 79701
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FWL & 660' FNL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <u>Drilling operations</u>	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Spud well at 9:30 PM 11-30-83. Drilled 12 1/4" hole to 1064'. Ran 8-5/8" 20# MU-46 casing & set at 1064', cemented with 427 sacks Lite III & 200 sks Class "C" Neat, good circulation. Plug dwn at 10:30 PM. WOC 14 hrs. Test casing & BOP, drill 7-7/8" hole to 3350', ran 4-1/2" 9.5#, J-55 csg to 3347' & cmtd with 150 sks 50-50 Poz & 150 sks Class "C" Neat. Plug dwn at 9:54 PM. Release rotary rig at 3:00 AM 12-9-83. Ran Temperature survey, TOC at 2600'. Waiting on completion.

ACCEPTED FOR RECORD

Subsurface Safety Valve: Manu. and Type _____

18. I hereby certify that the foregoing is true and correct

SIGNED _____

TITLE Sr. Prod. Engineer

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

5. LEASE LC 063916	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Elliott Federal	
9. WELL NO. 85	
10. FIELD OR WILDCAT NAME Rhodes Yates Seven Rivers	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21, T-26-S, R-37-E	
12. COUNTY OR PARISH Lea	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 2977' GR	

(NOTE: Report results of multiple completion or any one change on Form 9-331-C)

RECEIVED
DEC 2 1 50 PM '83
BUREAU OF LAND MANAGEMENT
ROSWELL DISTRICT

JAN 6 1984
Set @ _____

ROSWELL, NEW MEXICO

RECEIVED

JAN 10 1984

**O.C.D.
HOBBS OFFICE**